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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

9

Application Number

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First Named Inventor

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Art Unit

3724

Examiner Name

ADDISU, Sara

Attorney Docket Number

E20236

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MeadWestvaco Corporation		
Signature	/Jeffrey T Knapp/		
Printed name	JEFFREY T. KNAPP		
Date	17 November 2008	Reg. No.	45,384

CERTIFICATE OF TRANSMISSION/MAILING

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Signature	/Allison Mowery/		
Typed or printed name	ALLISON MOWERY	Date	17 November 2008

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